

Express Mail No. EV343557633US

Attorney Docket No. 108298724US

Disclosure No. 02-1202

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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032  
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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 108298724US

First Inventor Theodore M. Taylor

Title METHODS FOR REMOVING DOPED POLYSILICON FROM  
MICROFEATURE WORKPIECES

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## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

## ADDRESS TO:

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 23]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
5. Oath or Declaration [Total Pages 3]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for a continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATIONS PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☒ 37 C.F.R. §3.73(b) Statement [X] Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 [ ] Copies of IDS Citations
13. ☒ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: General Authorization for Extensions of Time Check

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

Prior application information:

Examiner

of prior application No: /

Group / Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

☐ Claims the benefit of Application No.

## 17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

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or ☐ Correspondence address below

PATENT TRADEMARK OFFICE

Name (Print/Type)

Paul T. Parker

Registration No. (Attorney/Agent)

38,264

Signature

*PTP*

Date

September 18, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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Attorney Docket No. 108298724US

Disclosure No. 02-1202

PTO/SB/17 (01-03)

Approved for use through 04/30/2003. OMB 0651-0032


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|   |  |                                 |  |
|---|--|---------------------------------|--|
| <h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">for FY 2003</h2> <p style="text-align: center;"><i>Effective 01/01/2003. Patent fees are subject to annual revision.</i></p> |  | <b>Compleat if Known</b>        |  |
|   |  | Application Number              |  |
|   |  | Filing Date                     |  |
|   |  | First Named Inventor            |  |
|   |  | Examiner Name                   |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Art Unit                        |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>1378</b>   |  | Attorney Docket No. 108298724US |  |

| <b>METHOD OF PAYMENT</b> ( <i>check all that apply</i> )  |            |                    |          | <b>FEE CALCULATION</b> (continued)   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|------------|--------------------|----------|--|-----------------|--------------|--|-----------------|----------|--------------|----------|-----------------|----------|----------|----------|----------|----------|------------------------|-----|------|-----|-------------------------------------|-----|-----------------------------------|----|------|-----|--|-----|---------------------------------------|-----|------|-----|---------------------------|-----|--|-------|------|-------|--|----|--|------|---------------------|------|--|--|------|-----------------|--|--------|---|--|--------------|-----|--------------------|----|--|--|--------------|-----|----------------|-----|---|--|------|-----|------|-----|--|--|------|-------|------|-----|---|--|------|------------|------|-----|--|-----|------|-----|------|-----|------------------|--|------|-----------|------|-----|--|----|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|----|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None<br>Order   |            |                    |          | <b>1. BASIC FILING FEE</b>   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number 50-0665<br>Deposit Account Name  |            |                    |          | <table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English Specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for <i>ex parte</i> reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>410</td> <td>2252</td> <td>205</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>930</td> <td>2253</td> <td>465</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,450</td> <td>2254</td> <td>725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>1,970</td> <td>2255</td> <td>985</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>320</td> <td>2401</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>320</td> <td>2402</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>280</td> <td>2403</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>1453</td> <td>1,300</td> <td>2453</td> <td>650</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>1501</td> <td>1,300</td> <td>2501</td> <td>650</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>1502</td> <td>470</td> <td>2502</td> <td>235</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>1503</td> <td>630</td> <td>2503</td> <td>315</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>1460</td> <td>130</td> <td>1460</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Processing fee under 37 CFR 1.17(q)</td> <td></td> </tr> <tr> <td>1806</td> <td>180</td> <td>1806</td> <td>180</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td>40</td> </tr> <tr> <td>1809</td> <td>750</td> <td>2809</td> <td>375</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>1810</td> <td>750</td> <td>2810</td> <td>375</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>1801</td> <td>750</td> <td>2801</td> <td>375</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> </tbody> </table> |                 |              |  | Large Entity    |          | Small Entity |          | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051                   | 130 | 2051 | 65  | Surcharge - late filing fee or oath |     | 1052                              | 50 | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet |     | 1053                                  | 130 | 1053 | 130 | Non-English Specification |     | 1812   | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |    | 1804   | 920* | 1804                | 920* | Requesting publication of SIR prior to Examiner action |  | 1805 | 1,840*          | 1805   | 1,840* | Requesting publication of SIR after Examiner action |  | 1251         | 110 | 2251               | 55 | Extension for reply within first month |  | 1252         | 410 | 2252           | 205 | Extension for reply within second month |  | 1253 | 930 | 2253 | 465 | Extension for reply within third month |  | 1254 | 1,450 | 2254 | 725 | Extension for reply within fourth month |  | 1255 | 1,970      | 2255 | 985 | Extension for reply within fifth month |     | 1401 | 320 | 2401 | 160 | Notice of Appeal |  | 1402 | 320       | 2402 | 160 | Filing a brief in support of an appeal |    | 1403 | 280 | 2403 | 140 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,300 | 2453 | 650 | Petition to revive - unintentional |  | 1501 | 1,300 | 2501 | 650 | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40 | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |            | Small Entity       |          | Fee Description  | Fee Paid        |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code           | Fee (\$) |  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130        | 2051               | 65       | Surcharge - late filing fee or oath  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50         | 2052               | 25       | Surcharge - late provisional filing fee or cover sheet   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130        | 1053               | 130      | Non-English Specification  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520      | 1812               | 2,520    | For filing a request for <i>ex parte</i> reexamination   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*       | 1804               | 920*     | Requesting publication of SIR prior to Examiner action   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*     | 1805               | 1,840*   | Requesting publication of SIR after Examiner action  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110        | 2251               | 55       | Extension for reply within first month   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 410        | 2252               | 205      | Extension for reply within second month  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 930        | 2253               | 465      | Extension for reply within third month   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,450      | 2254               | 725      | Extension for reply within fourth month  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 1,970      | 2255               | 985      | Extension for reply within fifth month   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 320        | 2401               | 160      | Notice of Appeal   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 320        | 2402               | 160      | Filing a brief in support of an appeal   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 280        | 2403               | 140      | Request for oral hearing   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510      | 1451               | 1,510    | Petition to institute a public use proceeding  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110        | 2452               | 55       | Petition to revive - unavoidable   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,300      | 2453               | 650      | Petition to revive - unintentional   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,300      | 2501               | 650      | Utility issue fee (or reissue)   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 470        | 2502               | 235      | Design issue fee   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 630        | 2503               | 315      | Plant issue fee  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130        | 1460               | 130      | Petitions to the Commissioner  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50         | 1807               | 50       | Processing fee under 37 CFR 1.17(q)  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180        | 1806               | 180      | Submission of Information Disclosure Stmt  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40         | 8021               | 40       | Recording each patent assignment per property (times number of properties)   | 40              |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 750        | 2809               | 375      | Filing a submission after final rejection (37 CFR 1.129(a))  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 750        | 2810               | 375      | For each additional invention to be examined (37 CFR 1.129(b))   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 750        | 2801               | 375      | Request for Continued Examination (RCE)  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900        | 1802               | 900      | Request for expedited examination of a design application  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>FEE CALCULATION</b>  |            |                    |          | Other fee (specify) _____  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>750</td> <td>2001</td> <td>375</td> <td>Utility filing fee</td> <td>750</td> </tr> <tr> <td>1002</td> <td>330</td> <td>2002</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>520</td> <td>2003</td> <td>260</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>750</td> <td>2004</td> <td>375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1205</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td><b>(\$ 750)</b></td> </tr> </tbody> </table>  |            |                    |          | Large Entity   |                 | Small Entity |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code        | Fee (\$) | 1001     | 750      | 2001     | 375      | Utility filing fee     | 750 | 1002 | 330 | 2002                                | 165 | Design filing fee                 |    | 1003 | 520 | 2003   | 260 | Plant filing fee                      |     | 1004 | 750 | 2004                      | 375 | Reissue filing fee                                 |       | 1205 | 160   | 2005   | 80 | Provisional filing fee                                     |      | <b>SUBTOTAL (1)</b> |      |  |  |      | <b>(\$ 750)</b> | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1"> <thead> <tr> <th colspan="2">Total Claims</th> <th colspan="2">Independent Claims</th> <th colspan="2">Multiple Dependent</th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th colspan="2">Fee Paid</th> </tr> <tr> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>48</td> <td>-20** = 28</td> <td>X</td> <td>18</td> <td>=</td> <td>504</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>- 3** = 1</td> <td>X</td> <td>84</td> <td>=</td> <td>84</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |        |   |  | Total Claims |     | Independent Claims |    | Multiple Dependent                     |  | Extra Claims |     | Fee from below |     | Fee Paid                                |  |      |     |      |     |  |  |      |       |      |     |   |  | 48   | -20** = 28 | X    | 18  | =                                      | 504 |      |     |      |     |                  |  | 4    | - 3** = 1 | X    | 84  | =                                      | 84 |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |            | Small Entity       |          | Fee Description  | Fee Paid        |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code           | Fee (\$) |  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 750        | 2001               | 375      | Utility filing fee   | 750             |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 330        | 2002               | 165      | Design filing fee  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 520        | 2003               | 260      | Plant filing fee   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 750        | 2004               | 375      | Reissue filing fee   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 160        | 2005               | 80       | Provisional filing fee   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (1)</b>   |            |                    |          |  | <b>(\$ 750)</b> |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims  |            | Independent Claims |          | Multiple Dependent   |                 | Extra Claims |  | Fee from below  |          | Fee Paid     |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|   |            |                    |          |  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 48  | -20** = 28 | X                  | 18       | =  | 504             |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 4   | - 3** = 1  | X                  | 84       | =  | 84              |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>280</td> <td>2203</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>84</td> <td>2204</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>(\$ 588)</b></td> </tr> </tbody> </table> |            |                    |          | Large Entity   |                 | Small Entity |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code        | Fee (\$) | 1202     | 18       | 2202     | 9        | Claims in excess of 20 |     | 1201 | 84  | 2201                                | 42  | Independent claims in excess of 3 |    | 1203 | 280 | 2203   | 140 | Multiple dependent claim, if not paid |     | 1204 | 84  | 2204                      | 42  | ** Reissue independent claims over original patent |       | 1205 | 18    | 2205   | 9  | ** Reissue claims in excess of 20 and over original patent |      | <b>SUBTOTAL (2)</b> |      |  |  |      | <b>(\$ 588)</b> | <b>SUBTOTAL (3)</b> (\$) <b>40</b>   |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |            | Small Entity       |          | Fee Description  | Fee Paid        |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code           | Fee (\$) |  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18         | 2202               | 9        | Claims in excess of 20   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84         | 2201               | 42       | Independent claims in excess of 3  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280        | 2203               | 140      | Multiple dependent claim, if not paid  |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84         | 2204               | 42       | ** Reissue independent claims over original patent   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18         | 2205               | 9        | ** Reissue claims in excess of 20 and over original patent   |                 |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (2)</b>   |            |                    |          |  | <b>(\$ 588)</b> |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |                     |      |  |  |      |                 |  |        |   |  |              |     |                    |    |  |  |              |     |                |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |            |      |     |  |     |      |     |      |     |                  |  |      |           |      |     |  |    |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |

*\*or number previously paid, if greater; For Reissues, see above*

|                     |   |                                   |                    |
|---------------------|---|-----------------------------------|--------------------|
| <b>SUBMITTED BY</b> |   | (Complete if applicable)          |                    |
| Name (Print/Type)   | Paul T. Parker  | Registration No. (Attorney/Agent) | 38,264             |
| Signature           |  | Telephone                         | (206) 359-3258     |
|                     |   | Date                              | September 18, 2003 |

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF: THEODORE M. TAYLOR AND  
STEPHEN J. KRAMER  
FILED: CONCURRENTLY HEREWITH  
FOR: **METHODS FOR REMOVING DOPED  
POLYSILICON FROM MICROFEATURE  
WORKPIECES**

**Authorization for Extensions of Time Under 37 C.F.R. § 1.136(a)(3)**

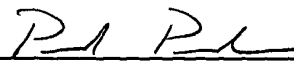
Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

With respect to the above-identified application, the Commissioner is authorized to treat any concurrent or future reply requiring a petition for an extension of time under 37 C.F.R. § 1.136(a)(3) for its timely submission as incorporating a petition therefor for the appropriate length of time. The Commissioner is also authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-0665.

Respectfully submitted,  
Perkins Coie LLP

Date: 9.18.03

  
\_\_\_\_\_  
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